

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	10/24
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	HS	58866	11-16-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 " Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	10/24/00
2	10/24/00
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Claim	Date
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If more than 150 claims or 10 actions
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